

CLAIMS ONLY							Application Number <div style="font-size: 1.2em; font-family: cursive;">1079741</div>		Filing Date		
							Applicant(s)				
* May be used for additional claims or amendments											
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		*		*		
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	
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Total Indep	↙		2		↙		↙		↙		
Total Depend	↘		5		↘		↘		↘		
Total Claims			7								

Application Number: 10797641

Filing Date

Applicant(\$)

* May be used for additional claims or amendments